

**This report is mandatory under P L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.**

**For Official Use Only**

**READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT**

1 File Number U

1245 ✓

2 Fiscal Year Covered From.

01 / 01 / 2004 Through 12 / 31 / 2004

**3 Name and address of person filing**

Name Wendell W. Young, IV

P O Box Bldg Room No if any

Street 3031A Walton Rd , Ste 201

City Plymouth Meeting

State PA ZIP Code + 4 19462

**4 Name file number and address of labor organization**

Name UFCW Local 1776

Labor Organization File Number 045-254

**P O Box Building and Room Number if any**

Street 3031A Walton Rd., Ste. 201

City Plymouth Meeting

State PA ZIP Code + 4 19462

### 5 Position in labor organization

President (Current)	In 2004 was Exec Vice President & Recorder
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Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

**A. Held an interest in** engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

**6 Name and address of Employer (including trade name if any)**

Name \_\_\_\_\_

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any

Street \_\_\_\_\_

City \_\_\_\_\_

State  ZIP Code + 4 

7 a Nature of Interest, Transaction or Income

7 b Amount

**Signature**

**15 Signature and verification** The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions.)

**Signed**

On

Date

Telephone Number

File Number U-

**B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested**

☐ c Employer

12 b Amount	\$3005.00
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**14 b Amount of payment.**

Name of Person Filing <u>Wendell W. Young, IV</u>	File Number <u>U-</u>
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any).

Name International Foundation of Employee Benefit Plans  
Trade Name if any: \_\_\_\_\_  
P O Box Bldg Room No if any P O Box 69  
Street 18700 W. Bluemound Road  
City Brookfield  
State WI ZIP Code + 4 53008-0069

9 Business deals with:

- ☐ a Labor Organization  
☒ b Trust  
☐ c Employer

10 If 9 b or 9 c. is checked give trust or employer's name

Name UFCW Local 1776 and Participating Employers Health and Welfare Plan  
Trade Name if any: \_\_\_\_\_  
P O Box Bldg Room No if any: \_\_\_\_\_  
Street 3031B Walton Road  
City Plymouth Meeting  
State PA ZIP Code + 4 19462

11 a Nature of such dealing

IFEBP is an employee benefits education association of which the UFCW Local 1776 Health and Welfare Plan is a member

11 b Approximate dollar value of such dealing

N/A

12 a Nature of interest held or income received

Reimbursement of travel hotel and meals for a conference planning meeting in July 2004 (\$720 00)  
Complimentary registration for the annual Employee Benefits Conference in November (\$915 00)

12 b Amount

\$1635 00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name: \_\_\_\_\_  
Trade Name if any: \_\_\_\_\_  
P O Box Bldg Room No if any: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ ZIP Code + 4: \_\_\_\_\_

14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing **Wendell W Young IV**File Number **U**

**B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested**

**8 Name and address of Business (including trade name if any)**

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State  ZIP Code + 4

**9 Business deals with:**

- ☐ a Labor Organization
- ☐ b Trust
- ☐ c Employer

**10 If 9 b or 9 c is checked give trust or employer's name**

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State  ZIP Code + 4

**11 a Nature of such dealing****11 b Approximate dollar value of such dealing****12 a Nature of interest held or income received****12 b Amount**

**C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value**

**13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)**

Name  **Fiergang & Simmons, PC**

Trade Name if any

P O Box Bldg Room No if any

Street  **540 Pennsylvania Ave , Ste 202**

City  **Ft Washington**

State  **PA** ZIP Code + 4  **19034**

**14 a Nature of payment.**

Holiday gift snack basket Do not know value Put out for clerical staff to be enjoyed by all

**13 b Is the Business an Employer ☐ or Consultant ☐ ?**  
**Employer Counsel**

**14 b Amount of payment****?**

Name of Person Filing	Wendell W Young IV	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

<b>8 Name and address of Business (including trade name if any).</b> Name <u>Slevin &amp; Hart, PC</u> Trade Name if any <u></u> P O Box Bldg Room No if any <u></u> Street <u>1625 Massachusetts Ave NW Ste. 450</u> City <u>Washington</u> State <u>DC</u> ZIP Code + 4 <u>20036</u>	<b>9 Business deals with:</b> <input type="checkbox"/> a Labor Organization <input checked="" type="checkbox"/> b Trust <input type="checkbox"/> c Employer
<b>10 If 9 b or 9 c. is checked give trust or employer's name</b> Name <u>UFCW Health &amp; Welfare Fund of Northeastern Pennsylvania</u> Trade Name if any <u></u> P O Box Bldg Room No if any <u></u> Street <u>190 N Pennsylvania Avenue</u> City <u>Wilkes-Barre</u> State <u>PA</u> ZIP Code + 4 <u>18701</u>	<b>11 a Nature of such dealing</b> <u>Fund counsel</u> <b>11 b Approximate dollar value of such dealing</b> <u>\$327,000 00</u> <b>12 a Nature of interest held or income received</b> <u>Holiday gift (snack) basket Dollar value is not known Basket was put out for clerical staff to be enjoyed by all</u> <b>12 b Amount</b> <u>?</u>

<b>C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value</b>	
<b>13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)</b> Name <u></u> Trade Name if any <u></u> P O Box Bldg Room No if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	<b>14 a Nature of payment</b> <u></u> <b>14 b Amount of payment</b> <u></u>
<b>13 b Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input type="checkbox"/> <b>?</b>	